## Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND							
1 Date of Request: 1130 02 2 Serial/Patent # 09 673, 739							
3 Please refund th following fee(s):		4 PAI NUM	PER MBER	5 DATE FILED	6 AMOUNT		
	Filing				\$		
	Amendment				\$		
✓ Extension of Time		18		8/29/02	\$ 260.00		
Notice of Appeal/Appeal					\$		
Petition					\$		
	Issue				\$		
	Cert of Correction/Terminal Disc.				\$		
:	Maintenance				\$		
	Assignment				\$		
	Other				\$		
		7 TOTAL AMOUNT \$ 260.0			\$ 260.00		
***************************************		8 TO BE REFUNDED BY:					
10 REASON:		Treasury Check					
	Overpayment	Credit Deposit A/C #:					
	Duplicate Payment			, 02-2448			
<b>√</b>	No Fee Due (Explanation):						
Applicant filed an extrasion of time beyond the maximum period available for reply.							
11 REFUND REQUESTED BY:							
TYPED/PRINTED NAME: Chff Congo TITLE: Petitions Afformey							
SIGNATURE:							
office: Pcthus							
THIS SPACE RESERVED FOR FINANCE USE ONLY:							
APPROVED: Ulua Killi DATE: 12/02/02							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B